

01-23-04

PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: **Mail**

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24231 7590 10/22/2003

LEXICON GENETICS INCORPORATED
8800 TECHNOLOGY FOREST PLACE
THE WOODLANDS, TX 77381-1160



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Nancy Stacey	(Depositor's name)
	(Signature)
January 22, 2004	(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/707,121	11/06/2000	Brian Mathur	LEX-0083-USA	8244

TITLE OF INVENTION: NOVEL HUMAN KINASE PROTEIN AND POLYNUCLEOTIDES ENCODING THE SAME

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	YES	\$365 \$1,330.00	\$0	\$365 \$1,330.00	01/22/2004
EXAMINER	ART UNIT	CLASS-SUBCLASS			
PAK, YONG D	1652	536-023200			

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.

☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.

2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1 _____

2 _____

3 _____

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment has been previously submitted to the USPTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

Lexicon Genetics Incorporated

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

The Woodlands, TX
 USA

Please check the appropriate assignee category or categories (will not be printed on the patent); ☐ individual ☒ corporation or other private group entity ☐ government

4a. The following fee(s) are enclosed:

☒ Issue Fee

☐ Publication Fee

☒ Advance Order - # of Copies 7

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☐ A check in the amount of the fee(s) is enclosed.

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(Authorized Signature) [Signature] (Date) January 22, 2004

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Customer # 24231

01/28/2004 AWONDAF2 00000153 500892 09707121

01 FC:1501 1330.00 DA
 02 FC:8001 21.00 DA

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